

# SENATE BILL REPORT

## SSB 5798

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As Amended by House, March 3, 2010

**Title:** An act relating to medical marijuana.

**Brief Description:** Concerning medical marijuana.

**Sponsors:** Senate Committee on Health & Long-Term Care (originally sponsored by Senators Kohl-Welles, McCaslin, Keiser, Pflug and Kline).

**Brief History:**

**Committee Activity:** Health & Long-Term Care: 2/19/09, 2/24/09 [DPS].

Passed Senate: 2/05/10, 37-11.

Passed House: 3/03/10, 59-39; 58-40 (reconsidered).

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### SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

**Majority Report:** That Substitute Senate Bill No. 5798 be substituted therefor, and the substitute bill do pass.

Signed by Senators Keiser, Chair; Franklin, Vice Chair; Pflug, Ranking Minority Member; Becker, Fairley, Marr and Murray.

**Staff:** Edith Rice (786-7444)

**Background:** Under Initiative Measure No. 692, the citizens of the state of Washington approved in November 1998 the Washington State medical use of marijuana act (act), intended to allow for the limited medical use of marijuana by patients with terminal or debilitating illnesses.

ESSB 6032, enacted in 2007, provided that qualifying patients and any designated provider who assists them in the medical use of marijuana will be deemed to have established an affirmative defense if they comply with the requirements under this act.

Current law requires that a qualifying patient have valid documentation from a physician that states that, in the physician's professional opinion, the patient may benefit from the medical use of marijuana. A physician who advises a qualifying patient regarding the medical use of marijuana cannot be penalized in any manner.

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.*

The Department of Health (DOH) has adopted rules defining the quantity of marijuana that could reasonably be presumed to be a 60-day supply. DOH has made recommendations to the Legislature addressing access to an adequate, safe, consistent, and secure source of medical marijuana for qualifying patients. This report is available from the DOH.

**Summary of Substitute Bill:** Health care professionals are defined for purposes of this act as physicians, osteopathic physicians, physician assistant and osteopathic physician assistants, naturopaths, and advanced registered nurse practitioners.

Health care professionals may provide the valid documentation which authorizes the medical use of marijuana for qualified patients who may benefit from its use. Health care professionals who advise patients regarding the medical use of marijuana cannot be penalized for doing so.

**Appropriation:** None.

**Fiscal Note:** Not requested.

**Committee/Commission/Task Force Created:** No.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Staff Summary of Public Testimony on Original Bill:** PRO: Many rural patients are more likely to have access to a nurse practitioner or physician assistant than a physician. By giving nurse practitioners and physician assistants the ability to provide the proper documentation for the medical use of marijuana, this provides them greater access to the care patients need. We would like to see naturopaths added to the list of health care professionals since they have appropriate training. Patients in clinics and emergency care are more likely to see a nurse practitioner or physician assistant, and should have access to medical marijuana.

**Persons Testifying:** PRO: Senator Kohl-Welles, prime sponsor; Robert May, Washington Association of Naturopathic Physicians; Laurie Mischley, WANP; Joanna McLean, Stich Miller, Green Cross; Richard Brender, citizen.

**House Amendment(s):** An authorization of marijuana use must be written by the health care professional on a tamper resistant paper approved by the Board of Pharmacy for authorizations written on or after the effective date of this act. Copies of an authorizing statement or medical records will no longer be valid documentation.